

Patients' Preference for *Veramyst* Nasal Spray

This information is provided in response to your request for information about Veramyst® (fluticasone furoate) Nasal Spray.

SUMMARY

- In clinical trials, the majority of adults and adolescents aged 12 years and older completing a product characteristic questionnaire found that *Veramyst* Nasal Spray was easy to carry and operate, comfortable to administer, and that the mist generated by the device was gentle.
- Approximately one-third of patients experienced no medication leakage from the nose or down the throat and approximately half reported no aftertaste following administration of *Veramyst*.
- The results of a multicenter, double-blind, single-dose, crossover study suggest that *Veramyst* has sensory attributes that are preferable when compared with those of fluticasone propionate nasal spray (FPNS). Significantly more patients preferred *Veramyst* overall and on individual sensory attributes of odor, taste, aftertaste, dripping down the throat, and nose run-off.
- Important safety information is found in the attached Prescribing Information.

PATIENT PREFERENCE FOR *VERAMYST*

Patients who participated in clinical studies for *Veramyst* completed a product characteristic questionnaire consisting of 6 subjective questions pertaining to their experience with the nasal spray device. The questions encompassed portability and acceptability of the device and perceptions regarding aftertaste, spray “run-off” following administration, and spray sensation. This questionnaire has not been validated but was used to gather data on the product.

Patient Preference for *Veramyst* in Seasonal Allergic Rhinitis (SAR)

Patients' experience with *Veramyst* Nasal Spray 110 mcg once daily (QD) in the morning was evaluated in 3, 2-week, double-blind, randomized, parallel-group, placebo controlled trials.^(1,2,3) Studies 1 (N=299), 2 (N=285), and 3 (N=302) consisted of patients ≥12 years of age who had a diagnosis of SAR due to ragweed, grass pollen and mountain cedar, respectively. Results from the product characteristic questionnaire demonstrated that 91%-95% of patients with SAR found the nasal spray device to be somewhat easy to extremely easy to carry (Table 1). Eighty-two percent (82%) to 91% found the device to be somewhat easy to extremely easy to operate. The nasal spray nose tip was considered comfortable or extremely comfortable during administration of the spray by 93%-97% of patients. The mist generated by the device was rated as moderately to extremely gentle by 78%-93% of study participants. Approximately, one-third of patients reported no medication leakage out of the nose or down the throat. Most patients reported no aftertaste (52%-55%) or only a weak aftertaste (35%-36%) following administration of *Veramyst*.

Patient Preference for *Veramyst* in Perennial Allergic Rhinitis (PAR)

Patients' experience with *Veramyst* Nasal Spray was evaluated in a 4-week, double-blind, randomized, parallel-group, placebo-controlled study (N=302).⁽⁴⁾ Patients ≥ 12 years of age with a diagnosis of PAR symptomatic to animal dander, house dust mites, cockroaches, and/or mold were randomized to treatment with *Veramyst* 110 mcg or vehicle placebo QD in the morning (4).

Product questionnaire results demonstrated that 94% of patients with PAR found the nasal spray device somewhat easy to extremely easy to carry (Table 1). Seventy-eight percent (78%) found the device to be somewhat easy to extremely easy to operate. The nasal spray nose tip was considered comfortable or

extremely comfortable during administration of the spray by 95% of patients. The mist generated by the device was rated as moderately to extremely gentle by 90% of study participants. Thirty-eight percent (38%) of patients reported no medication leakage from the nose or down the throat. Approximately half of the patients (54%) reported no aftertaste or only a weak aftertaste (38%) following administration of *Veramyst*.

Table 1. Summary of Product Characteristic Questionnaire and Patient Preference for *Veramyst*

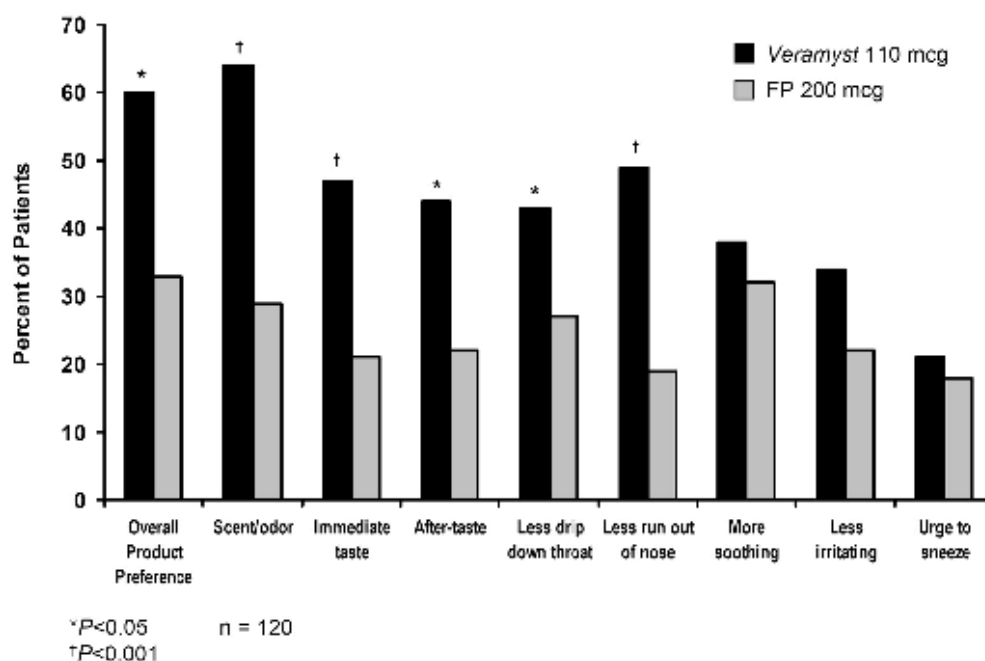
Characteristic	SAR			PAR
	Study 1 (N=299) n (%)	Study 2 (N=285) n (%)	Study 3 (N=302) n (%)	Study 4 (N=302) n (%)
Ease in carrying the nasal spray				
Extremely easy	189 (63)	139 (49)	197 (65)	186 (62)
Somewhat easy	97 (32)	121 (42)	90 (30)	97 (32)
Somewhat difficult	6 (2)	23 (8)	13 (4)	13 (4)
Extremely difficult	3 (1)	0	1 (<1)	3 (<1)
Missing data	1 (<1)	---		2 (<1)
Ease in operating the nasal spray				
Extremely easy	184 (62)	111 (39)	168 (56)	132 (44)
Somewhat easy	87 (29)	122 (43)	85 (28)	104 (34)
Somewhat difficult	21 (7)	46 (16)	39 (13)	53 (18)
Extremely difficult	4 (1)	4 (1)	9 (3)	11 (4)
Missing data	---	---	---	1 (<1)
Comfort of the nasal spray nose tip				
Extremely comfortable	124 (41)	79 (28)	136 (45)	115 (38)
Comfortable	160 (54)	184 (65)	157 (52)	171 (57)
Uncomfortable	9 (3)	18 (6)	6 (2)	12 (4)
Extremely uncomfortable	3 (1)	2 (<1)	2 (<1)	2 (<1)
Missing data	---	---	---	1 (<1)
Gentleness of the nasal spray mist				
Extremely gentle	160 (54)	98 (34)	176 (58)	150 (50)
Moderately gentle	118 (39)	126 (44)	99 (33)	122 (40)
Slightly gentle	16 (5)	48 (17)	26 (9)	23 (8)
Not at all gentle	2 (<1)	11 (4)	0	5 (2)
Missing data	---	---	---	1 (<1)
Amount of nasal spray leaking out of nose or down throat				
None of the medication	87 (29)	127 (45)	102 (34)	116 (38)
Some of the medication	192 (64)	142 (50)	182 (60)	164 (54)
A lot of the medication	13 (4)	14 (5)	14 (5)	16 (5)
All of the medication	4 (1)	0	3 (<1)	4 (1)
Missing data	---	---	---	1 (<1)
Strength of aftertaste of the nasal spray				
No aftertaste	156 (52)	156 (55)	165 (55)	164 (54)
Weak aftertaste	107 (36)	99 (35)	107 (35)	114 (38)
Moderately strong aftertaste	30 (10)	27 (9)	26 (9)	22 (7)
Extremely strong aftertaste	3 (1)	1 (<1)	3 (<1)	0
Missing data	---	---	---	1 (<1)

PATIENT PREFERENCE FOR *VERAMYST* VS. FLUTICASONE PROPIONATE NASAL SPRAY (FPNS)

Veramyst was compared with generic FPNS to identify patient preferences for selected product sensory attributes in a multicenter, double-blind, single-dose crossover study.⁽⁵⁾ Patients ≥ 18 years of age with symptomatic seasonal and/or perennial allergic rhinitis (N=127) were randomized 1:1 to receive *Veramyst* 110 mcg followed by FPNS 200 mcg or FPNS followed by *Veramyst*. The primary measure was the overall preference for *Veramyst* or FPNS based on selected sensory attributes. Secondary measures were preferences for and subject ratings of individual sensory attributes. These attributes were assessed immediately after and 2 minutes after each single-dose treatment. At the end of crossover dosing and after completion of all attributes questionnaires, preference for individual attributes of *Veramyst* or FPNS as well as overall preference were evaluated in a third questionnaire. The 3 subject questionnaires were similar to those used previously to evaluate subjects' overall preference for therapy of allergic rhinitis.⁽⁶⁾ Since the objective of this study involved subject-rated evaluation during and following crossover dosing, no efficacy data were collected. Therefore, the study outcomes are limited to health outcome endpoints.

A summary and analysis of attribute preference from 120 participants is presented in Figure 1. Overall, significantly more patients preferred *Veramyst* over FPNS (60% vs. 33%). Although 30% or more patients indicated no preference with regard to most sensory attributes, significantly more patients preferred *Veramyst* for scent/odor, immediate taste and aftertaste, less dripping down the throat, and less nose run-off.

Figure 1. Overall & Selected Product Attribute Preferences for *Veramyst* Compared with Generic Fluticasone Propionate Nasal Spray (FPNS)



Enclosure: Prescribing Information for *Veramyst*

Some information contained in this response may not be included in the approved Prescribing Information. This response is not intended to offer recommendations for administering this product in a manner inconsistent with its approved labeling.

In order for GlaxoSmithKline to monitor the safety of our products, we encourage healthcare professionals to report adverse events or suspected overdoses to the company at 888-825-5249. Please consult the attached Prescribing Information.

This response was developed according to the principles of evidence-based medicine and, therefore, references may not be all-inclusive.

REFERENCE(S)

1. Data on File. Study FFR104861 (RM2005/00635/00). 2006. *
2. Data on File. Study FFR103184 (HM2005/00492/00). 2006. *
3. Data on File. Study FFR30003 (RM2005/00195/00). 2005. *
4. Data on File. Study FFR30002 (RM2005/00185/00). 2005. *
5. Meltzer E, Stahlman J, Leflein J, et al. A patient preference evaluation study comparing the sensory attributes of fluticasone furoate nasal spray with fluticasone propionate nasal spray [abstract]. In: Abstracts of the Annual Meeting of the American College of Allergy, Asthma & Immunology; November 8-14, 2007; Dallas TX. Abstract P247. (FFU108556) *
6. Meltzer EO, Bardelas J, Goldsobel A, et al. A preference evaluation study comparing the sensory attributes of mometasone furoate and fluticasone propionate nasal sprays by patients with allergic rhinitis. *Treat Respir Med* 2005;4(4):289-296.*